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BROWN COUNTY MENTAL HEALTH CENTER

2900 ST ANTHONY DR Control: COUNTY Analysis Area: NORTHEASTERN (4)

GREEN BAY WI 54311-9962 Reporting Period: 01/01/00 To 12/31/00 Volume Group: 1 (920) 434-4750

		All Psychiatric Hospitals		FY 2000 vs. 1999		
Selected Utilizations Statistics	FY 2000	Value	Ratio	FY 1999	Ratio	
Occupancy Rate (%)	I					
Psychiatric	39.5%	67.7%	0.58	38.0%	1.04	
Alcoholism/chemical dependency	0.0%	41.6%	0.00	0.0%	0.00	
Total hospital	39.5%	66.5%	0.59	38.0%	1.04	
Average Census (Patients)				į		
Psychiatric	39.5	71.2	0.55	38.0	1.04	
Alcoholism/chemical dependency	0.0	41.6	0.00	0.0	1.04	
Total hospital	29.2	37.5	0.78	28.1	0.00	
Average Length of Stay (Days)				į		
Psychiatric	6.5	19.5	0.33	6.6	0.97	
Alcoholism/chemical dependency	0.0	5.5	0.00	0.0	0.00	
Total hospital	6.5	9.0	0.71	6.6	1.00	
Outpatient Visits				İ		
Non-emergency visits	774	23,769	0.03	1,966	0.39	
Emergency visits	906	1,859	0.49	831	1.09	
Full-time Equivalents (FTEs)				İ		
Administrators	2	6	0.31	j 4	0.54	
Nurses, licensed	17	40	0.42	19	0.87	
Psychologists	1	4	0.24	j 1	1.00	
Social workers	4	15	0.29	4	1.06	
All other personnel	43	126	0.34	50	0.85	
Total FTEs	81	208	0.39	98	0.82	
FTEs per 100 Patient Census (Adjusted)	İ			i		
Administrators	5	8	0.66	11	0.50	
Nurses, licensed	46	51	0.91	57	0.81	
Psychologists	3	5	0.51	3	0.93	
Social workers	12	19	0.63	12	0.98	
All other personnel	117	160	0.73	149	0.78	
Total FTEs	221	265	0.83	291	0.76	

Total Hospital: Contract with: Beds set up and staffed 74 Health maintenance Discharges 1,657 organization (HMO) YES Inpatient days 10,697 Preferred Provider

organization (PPO) YES

## Inpatient Service Area

Inpatient Service Area	Level of Service*	Beds Set Up and Staffed 12/31/00	Discharges and Transfers**	Patient Days of Care	Occupancy Rate (%)	Average Census (Patients)	Average Length of Stay (Days)
General Medical-Surgical:							
Adult medical-surgical, acute	5	0	0	0	0.0%	0.0	0.0
Orthopedic	5	0	0	0	0.0%	0.0	0.0
Rehab. and physical medicine	5	0	0	0	0.0%	0.0	0.0
Hospice	5	0	0	0	0.0%	0.0	0.0
Acute long term care	5	0	0	0	0.0%	0.0	0.0
Other acute	5	0	0	0	0.0%	0.0	0.0
Pediatric, acute	5	0	0	0	0.0%	0.0	0.0
Obstetrics	5	0	0	0	0.0%	0.0	0.0
Psychiatric	1	74	1,657	10,697	39.5%	29.2	6.5
Alcoholism/chemical dependency	2	0	0	0	0.0%	0.0	0.0
ICU/CCU:							
Medical-surgical intensive care	5	0	0	0	0.0%	0.0	0.0
Cardiac intensive care	5	0	0	0	0.0%	0.0	0.0
Pediatric intensive care	5	0	0	0	0.0%	0.0	0.0
Burn care	5	0	0	0	0.0%	0.0	0.0
Mixed intensive care	5	0	0	0	0.0%	0.0	0.0
Step-down (special care)	5	0	0	0	0.0%	0.0	0.0
Neonatal intensive/intermediate car	re 5	0	0	0	0.0%	0.0	0.0
Other intensive care	5	0	0	0	0.0%	0.0	0.0
Subacute care	5	0	0	0	0.0%	0.0	0.0
Other inpatient	5	0	0	0	0.0%	0.0	0.0

Note: data should be used only in rows; do not summarize columns.

<sup>\*\*</sup> Transfers, which may be estimated, refer only to those between units.

Occupation	Number Full-Time	Number Part-Time	Number FTE	Occupation	Number Full-Time	Number Part-Time	Number FTE
Administrators/asst. administrator	s 1	3	2	Radiological services personnel	0	0	0
Physicians and dentists	0	3	2	Occupational therapists	0	1	0
Medical and dental residents	0	0	0	Occupational therapy assistants/aides	0	1	0
Registered nurses	7	10	12	Physical therapists	0	0	0
Certified nurse midwives	0	0	0	Physical therapy assistants/aides	0	0	0
Licensed practical nurses	1	7	4	Recreational therapists	1	0	1
Ancillary nursing personnel	10	22	19	Psychologists	1	0	1
Physician assistants	0	0	0	Social workers	3	3	4
Nurse Practitioners	0	3	1	All other health professionals	3	4	5
Medical records personnel	2	0	2	All other personnel	9	59	23
Pharmacy personnel	2	0	2				
Clinical laboratory personnel	1	2	2	TOTAL	41	118	81

<sup>\* 1=</sup>Provided--Distinct Unit, 2=Provided--Not Distinct Unit, 3=Available in Network, 4=Contracted, 5=Service Not Provided.

	GREEN DAI								
INCOME STATEMENT			Į.	ASSETS			LIABILITIES AND FUND BALANCES		
	Gross patient revenue	\$7,208,209	Cash and cash equivalents	\$	0	Current liabilities	\$	0	
	Less deductions	1,225,579	Net patient receivables		0	Long-term debt		0	
	Net patient revenue	5,982,630	Other receivables		0	Other liabilities		0	
	Plus other revenue	879,235	Land, bldgs and equip: Net		0	Subtotal		0	
	Total revenue	6,861,865	Other assets		0				
	Less expenses	6,861,865				Unrestricted fund balance		0	
	Nonoperating gains/losses	0	TOTAL ASSETS		\$0	TOTAL LIABILITIES AND FUND BALANCE		0	
	NET INCOME \$	0				Restricted fund balances		\$0	

		All Psychiatric Hospitals		FY 200	FY 2000 vs. 1999	
Selected Financial Statistics	FY 2000	Value	Ratio	FY 1999	Ratio	
Gross Rev as % of Total Gross Patier						
Medicare [ \$1,948,914		15.2%	1.78	21.8%	1.24	
Medical Assistance [ \$1,417,376		13.7%	1.43	27.2%	0.72	
Commercial [ \$1,406,000		34.0%	0.57	18.1%	1.08	
All other [ \$2,435,919		37.1%	0.91	32.9%	1.03	
Deductions as % of Total Gross Patie				ļ		
Medicare [ \$1,228,635		7.1%	2.40	10.7%	1.59	
Medical Assistance [ \$-346,474		5.4%	#	10.9%	#	
Commercial [ \$656,138		10.9%	0.84	8.0%	1.14	
Charity care [ \$0		6.5%	0.00	0.0%	0.00	
All other [ \$-312,720		1.1%	#	-14.2%	0.31	
Total deductions [ \$1,225,579	9] 17.0%	30.9%	0.55	15.4%	1.10	
Other Revenue and Net Gains or Losse	es					
Other revenue as % of total revenu	ıe 12.8%	33.3%	0.38	10.6%	1.21	
Net gains/losses as % of net incom	ne 0.0%	39.8%	0.00	0.0%	0.00	
Expenses as % of Total Expenses						
Salary/fringe benefits[ \$4,641,350	67.6%	50.1%	1.35	77.2%	0.88	
Supplies and services[ \$2,102,385	30.6%	45.2%	0.68	21.4%	1.43	
Capital component [ \$118,130	1.7%	3.3%	0.53	1.4%	1.25	
Bad debt [ \$0	0.0%	1.5%	0.00	0.0%	0.00	
Fiscal Statistics				İ		
Operating margin	0.0%	0.5%	0.00	0.0%	0.00	
Total hospital profit margin	0.0%	0.8%	0.00	0.0%	0.00	
Return on equity	0.0%	5.5%	0.00	0.0%	0.00	
Current ratio	0.0	2.3	0.00	0.0	0.00	
Days in net patient accounts recei	ivable 0.0	31.1	0.00	0.0	0.00	
Average payment period	0.0	22.7	0.00	0.0	0.00	
Equity financing	0.0%	49.1%	0.00	0.0%	0.00	
Long-term debt to equity ratio	0.0	0.6	0.00	0.0	0.00	
Times interest earned	0.0	2.3	0.00	0.0	0.00	
Total asset turnover	0.0	3.2	0.00	0.0	0.00	
Average age of plant: years	0.0	6.6	0.00	0.0	0.00	
Increase (decrease) total net pati	ient rev 3.2%	-4.0%	#	-10.0%	#	
Outpt. gross rev (% of total gross	s pt. rev) 16.7%	43.8%	0.38	16.3%	1.02	
Net Revenue Statistics	-			j		
Inpatient net revenue per dischard	ge \$2,988	\$4,601	0.65	\$3,228	0.93	
Innatient net revenue per day	\$445	\$476	0.93	\$485	0.92	
Outpatient net rev per visit	\$614	\$256	2.40	\$282	2.18	